SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DE	TIVERY
Complete Items 1, 2, and 3. Also complete Item 4 If Restricted Delivery is desired.  Print your name and address on the reverse	A. Signature	Agent
so that we can return the card to you.  Attach this card to the back of the maliplece, of the front if space permits.	B. Received by ( Printed Name)	G. Date of Delivery
1. Article Addressed to: 0%にR 円6(	D. Is delivery address different from item 17	
District of New Jersey Mr. William T. Walsh, Clerk United States District Court	08 CK 46	1
4015 Martin Luther King, Jr. Federal Building and United States Courthouse 50 Walnut Street Newark, NJ 07102	Certified Mail   Express	Mail acolpt for Morchandise
	4. Restricted Delivery? (Extra Fee)	☐ Yes
2. Article Number (Transfer from service label) 700L	0100 0001 7313 28	45

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